

United States Senate

April 14, 2020

The Honorable Mitch McConnell
Majority Leader
United States Senate

The Honorable Charles Schumer
Minority Leader
United State Senate

Dear Leader McConnell and Leader Schumer:

Thank you for your leadership to date in crafting bipartisan legislation to address the widespread impacts of the COVID-19 pandemic on American families. As you consider additional relief legislation, I urge you to prioritize funding for programs to combat the substantial racial health disparities that have emerged in COVID-19 testing and outcomes.

By now, you are no doubt aware that COVID-19 appears to be disproportionately infecting and killing minorities across the nation. In New York City, the epicenter of the pandemic in the United States, preliminary data reveals the virus is twice as deadly for Black and Latino people compared to white people.¹ In Arizona, which has reported race and ethnicity data for half of its COVID-19 deaths, Native Americans account for 16% of deaths despite comprising only 6% of the population.² While Black individuals make up roughly one-third of Chicago's population, they represent more than half of those who have tested positive and 68% of those who have died in the city, suggesting Black Chicagoans are dying from COVID-19 at a rate nearly six times greater than white residents.³ We have seen similar patterns emerge from Michigan to Louisiana, from the Carolinas to Las Vegas.⁴ Further, the lack of comprehensive data by race and ethnicity on COVID-19 testing, treatment, and outcomes severely limits our understanding of the true scope of this virus' impact on minority communities.

These numbers are staggering, sobering, and unsurprising. They reflect long-standing inequities in our health care system. They reflect that Blacks, Hispanics, and American Indians and Alaska Natives are more likely to be uninsured than white Americans, meaning they may not have a usual source of care and may forgo testing or treatment for fear of high out-of-pocket

¹ <https://www.nytimes.com/2020/04/08/nyregion/coronavirus-race-deaths.html>

² <https://www.usnews.com/news/best-states/arizona/articles/2020-04-12/arizona-releases-demographic-information-on-virus-deaths>

³ <https://www.chicagotribune.com/coronavirus/ct-coronavirus-chicago-coronavirus-deaths-demographics-lightfoot/>

⁴ <https://www.nytimes.com/2020/04/07/us/coronavirus-race.html>

costs.⁵ They reflect that communities of color are more likely to have underlying health conditions exacerbated by structural racism, such as asthma, diabetes, or obesity, that may make them more susceptible to becoming severely ill if infected by coronavirus.⁶ They reflect that minorities make up a disproportionate share of the front line workers that will carry our nation through this crisis—grocery store clerks, farmworkers, child care providers, domestic workers—and risk their health by continuing to go into work every day.⁷ And they reflect persistent bias in our health care system, with one study revealing physicians may be less likely to test Black patients with symptoms like cough and fever for COVID-19.⁸

To combat this pandemic, we must make serious investments to address the underlying racial inequities that permeate our health care system, our economy, and our society. As such, I request that you include the following provisions in the next COVID-19 relief package:

- **Provide funding for the Department of Health and Human Services (HHS) and its sub-agencies to collect and publish demographic data.** Allocate \$50 million to conduct or support data collection and public dissemination on the racial and ethnic implications of COVID-19 in the United States, as stipulated in Senator Warren and Representative Kelly’s Equitable Data Collection and Disclosure on COVID-19 Act.
- **Convene a racial disparities task force.** Direct HHS to convene a racial disparities task force with government leaders, tribal leaders, health care professionals, and community-based organizations to gather data from disproportionately impacted communities and provide recommendations to combat racial disparities in our nation’s COVID-19 response, similar to recently announced statewide task forces in Michigan and Louisiana.⁹
- **Prioritize resources like testing and personal protective equipment (PPE) for vulnerable communities.** Require the Federal Emergency Management Agency (FEMA) to prioritize allocation of resources, like testing and PPE, to communities at greatest risk of COVID-19 due to underlying health problems, lack of access to health care, and heightened exposure due to the nature of individuals’ work. Require President Trump to quickly and fully use the Defense Production Act so there are testing kits, supplies, ventilators, and PPE for everyone who needs them.

⁵ <https://www.kff.org/disparities-policy/issue-brief/communities-of-color-at-higher-risk-for-health-and-economic-challenges-due-to-covid-19/>

⁶ Id.

⁷ <https://www.nytimes.com/2020/04/08/nyregion/coronavirus-race-deaths.html>

⁸ <https://www.modernhealthcare.com/safety-quality/long-standing-racial-and-income-disparities-seen-creeping-covid-19-care>

⁹ <https://www.metrotimes.com/news-hits/archives/2020/04/09/gov-whitmer-assembles-task-force-to-tackle-coronavirus-racial-disparities>

- **Guarantee coverage for COVID-19 treatment.** Cover COVID-19 treatment and COVID-19-related treatment, including any drugs used to treat COVID-19, without cost-sharing for all people in the United States, including those without health insurance. Provide funding for culturally- and linguistically-sensitive, evidence-based outreach so uninsured individuals are aware they can obtain testing and treatment without incurring out-of-pocket costs.
- **Increase funding and reauthorize Community Health Centers (CHCs) for five years.** Provide an additional \$56.1 billion for Community Health Centers, the National Health Service Corps (NHSC), and the Teaching Health Centers Graduate Medical Education Program (THCGME), including \$46.6 billion to fully fund and reauthorize CHCs and NHSC for five years and an additional \$7.08 billion in emergency funding. These funds will allow CHCs to expand their reach and continue to provide high-quality health care to low-income individuals and communities.
- **Include minorities in clinical trials for vaccines and treatment.** Ensure any clinical trials for COVID-19 vaccines and treatment include participants that reflect the racial and socioeconomic demographics of the United States.
- **Ensure patients using hydroxychloroquine for its intended use are still able to access the medication.** The Food and Drug Administration (FDA) recently granted an Emergency Use Authorization (EUA) for the use of hydroxychloroquine to treat certain COVID-19 patients. The EUA has created a severe strain on access to hydroxychloroquine for patients who depend on it to control chronic diseases—including lupus patients, who are disproportionately Black and Hispanic women, and rheumatoid arthritis patients.¹⁰ The next relief package should ensure those patients currently using hydroxychloroquine for its intended use are still able to access the medication, and make contingencies should the drug be proven effective for COVID-19 so it is available to all patients whose health requires it.
- **Extend the paid sick days and paid family and medical leave protections in the Families First Coronavirus Response Act to all workers.** Enact Senators Murray and Gillibrand’s PAID Leave Act to provide all workers emergency paid sick days and paid family and medical leave so those who are sick or need to take care of a loved one during this crisis can do so without losing their job or their paycheck, and ensure these protections continue after the crisis.
- **Develop a standard COVID-19 testing protocol that addresses implicit bias.** Require HHS, in conjunction with health care professionals, to develop a standard protocol to

¹⁰ <https://www.cnn.com/2020/04/07/health/hydroxychloroquine-shortage-lupus-arthritis/index.html>

determine when to administer COVID-19 testing in order to combat the implicit bias in our health care system.

We will undoubtedly overcome this crisis. But how we do so will reveal much about who we are as a nation. I urge you to implement these requests to address the racial disparities that have emerged in this pandemic and to create a more just and equal health care system moving forward. Thank you for your consideration.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Kamala D. Harris', with a stylized flourish at the end.

Kamala D. Harris
United States Senator